BEST AVAILABLE COPY

PATENT APPLICATION FEE DETERMINATION RECORD

Effective November 10, 1998

Application or Docket Number

09/422775

CLAIMS AS FILED - PART I							ENTITY	,	OTHER	OTHER THAN	
50	OR			Column 1)		(Column 2) NUMBER EXTRA			OR	SMALL	
		'	NUMBE	ER FILED	NUMBER	EXTHA	RATE	FEE]	RATE	FEE
BA	ASIC FEE							380.00	OR		760.00
TOTAL CLAIMS			43] minus	20= * 22	>	X\$ 9=		OR	X\$18=	414
	DEPENDENT CI		3	minus	3 = *		X39=		OR	X78=	390
MULTIPLE DEPENDENT CLAIM PRESENT							+130=		OR	+260=	
* If the difference in column 1 is I				less than ze	ess than zero, enter "0" in column 2				OR	TOTAL	1564
	C			MENDE	D - PART II		222411			OTHER	
_			imn 1)		(Column 2)	(Column 3)	SMALL	ENTITY	OR	SMALL	
AMENDMENT A	37	REMA	AINING TER		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDN	Total	*		Minus	**]=	X\$ 9=	-	OR	X\$18=	
AME	Independent	* ENTATION		Minus	PENDENT CLAIM	=	X39=		OR	X78=	
	FINOTITIES	NIALICA	10F IVIC	LIIFLL DE	'ENDENT ODAM	<u></u>	+130=		OR	+260=	
							TOTAL		OR	TOTAL	
		/O-lu	41		:= : = 0		ADDIT. FEE	L	JO . ,	ADDIT. FEE	
		(Colur CLAI			(Column 2)	(Column 3)				-	
MENDMENT B		REMAI AFT AMEND	INING TER		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
ND	Total	*		Minus	**	=	X\$ 9=		OR	X\$18=	
AME	Independent FIRST PRESE	*		Minus	PENDENT CLAIM	=	X39=		OR	X78=	
_	1110111111	MAIL		LIII LL D.	ENDERT COSIN		+130=		OR	+260=	
							TOTAL ADDIT. FEE			TOTAL ADDIT. FEE	
		(Colun			(Column 2)	(Column 3)	AUUH. FEL			NDDII. FEC	
ပ		CLAI	IMS		HIGHEST			ADDI-			ADDI-
		REMAII AFTE AMENDI	ER		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	TIONAL FEE		RATE	TIONAL FEE
AMENDMEN	Total	*		Minus	**	=	X\$ 9=		OR	X\$18=	- 1
MA	Independent	*		Minus	***	=	X39=			X78=	
	FIRST PRESE	NTATION	OF MU	LTIPLE DEP	PENDENT CLAIM				OR	^/	
* If	f the intro in colur	ma 1 is les	than the	- cotor in colu	mn 2, write "0" in colu		+130=		OR	+260=	
***	f the "Highest Nun If the "Highest Nun	mb r Previo mber Previo	iously Paid iously Paid	id F 'c' IN THIS id For" IN THIS	mn 2, write "0" in colu S SPACE is less than S SPACE is less than Independent) is the I	n 20, enter "20." n 3, enter "3."	TOTAL ADDIT. FEE			TOTAL DDIT. FEE	

This Form is for INTERNAL PTO USE ONLY It does NOT get mailed to the applicant.

NOTICE OF FILING / CLAIM FEE(S) DUE (CALCULATION SHEET)

APPLICATION NUMBER: 09/422, 771

Total Fee Calculation

Total Fee Calculation										
	Fee Code	Total # Claims	Number Extra	X Fee	Fee		Total			
	Sm./Lg.			Sm. Entity	Lg. Entity		-			
Basic Filing Fee	201/101					a _	160			
Total Claims >20	203/103	<u>43</u> -20 =	$\frac{23}{2}$ x	<u> </u>	<u>/8</u>	=	44			
Independent Claims >3	202/102	3=	<u>ک</u> x		78	=	390			
Mult. Dep Claim Present	204/104			<u> </u>		=				
Surcharge	205/105					=	130			
English Translation	139									
TOTAL FEE CALCULA	ATION						1.694			
Fees due upon filing the application:										
Total Filing Fees Due	:= \$\langle \frac{1}{2}	rf								
Less Filing Fees Subr	mitted -\$_			-						
BALANCE DUE	= \$ <u>/</u> /	Ce94		-		•				
hon Villi	/0/2B/	9								
Office of Initial Patent Examination										